FORM D

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THOMSON INVANCUAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden



DATE RECEIVED

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)										
Private placement of up to \$40 million of li	mited liability c	ompany interest	S	CEIVED						
Filing Under (Check box(es) that apply):	☐ Rule 504	□ Rule 505	国 Rule 506	□ Section 4(6) / □ ULOE						
Type of Filing:	☑ Amendmen	t		# 1 14 15 10 19 2007 D						
	A. BAS	IC IDENTIFIC	CATION DATA							
1. Enter the information requested about th	e issuer									
Name of Issuer (check if this is an amenda	ent and name ha	as changed, and i	ndicate change.)	100 C 3 FT						
Winstanley Real Estate Opportunity Fund	II, LLC									
Address of Executive Offices	(Number and	Street, City, State	e, Zip Code)	Telephone Number (Including Area Code)						
c/o Winstanley Enterprises LLC, 150 Bake	r Avenue Exten	sion, Suite 303,		(978) 287-5000						
Concord MA 01742										
Address of Principal Business Operations	(Number and	Street, City, State	e, Zip Code)	Telephone Number (Including Area Code)						
(if different from Executive Offices)										
Brief Description of Business:										
The Company was formed primarily to ma	ke real estate in	vestments								
Type of Business Organization										
☐ corporation	☐ limited par	tnership, already	formed	図 other (please specify):						
☐ business trust	limited par	tnership, to be fo	rmed	limited liability company						
		Month	Year							
Actual or Estimated Date of Incorporation or	Organization:	<u> 10 3</u>	0 6	☐ Actual ☒ Estimated						
Jurisdiction of Incorporation or Organization	(Enter two-lett	er U.S. Postal Se	rvice abbreviation	for State:						
	CN for Canad	a; FN for other for	oreign jurisdiction) <u>D_E</u>						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC IDENT	IFICATON DATA		
 Each beneficial of the issuer; Each executive of 	the issuer, if the is wner having the po	suer has been organized wi	direct the vote or dispositi		re of a class of equity securities partnership issuers; and
Check Box(es) that Apply: Winstanley Fund II, LLC		☐ Beneficial Owner	☐ Executive Officer	☐ Director	■ General and/or Managing Partner
Full Name (Last name first,	if individual)			· • • • • • • • • • • • • • • • • • • •	
c/o Winstanley Enterprise	s LLC, 150 Baker	Avenue Extension, Suite	303, Concord, MA 01742	;	
Business or Residence Add	ress (Number and S	Street, City, State, Zip Code	·)		
Check Box(es) that Apply: David Winstanley	☑ Promoter	☐ Beneficial Owner	■ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				. .
c/o Winstanley Enterprise	s LLC, 150 Baker	Avenue Extension, Suite	303, Concord, MA 01742	<u> </u>	·
Business or Residence Add	ress (Number and S	Street, City, State, Zip Code	2)		
Check Box(es) that Apply: Adam Winstanley	☑ Promoter	☐ Beneficial Owner		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
c/o Winstanley Enterprise	s LLC, 150 Baker	Avenue Extension, Suite	303, Concord, MA 01742		
Business or Residence Add	ress (Number and S	Street, City, State, Zip Code)	·	
Check Box(es) that Apply: Carter Winstanley	☑ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
c/o Winstanley Enterprise	s LLC, 150 Baker	Avenue Extension, Suite	303, Concord, MA 01742		
Business or Residence Addi	ress (Number and S	Street, City, State, Zip Code)		
Check Box(es) that Apply: Barbara Green	□ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)	•	 		
c/o Winstanley Enterprises	s LLC, 150 Baker	Avenue Extension, Suite 3	303, Concord, MA 01742		
Business or Residence Addr	ess (Number and S	treet, City, State, Zip Code)		
Check Box(es) that Apply: Demian Gage	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
c/o Winstanley Enterprises	LLC, 150 Baker	Avenue Extension, Suite 3	03, Concord, MA 01742		
Business or Residence Addr	ess (Number and S	treet, City, State, Zip Code)		
Check Box(es) that Apply: Brett Lazar	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	,	Avanua Estancian Cuita 1	102 Corinand BAA 01742		
c/o Winstanley Enterprises Business or Residence Addr					
	(I to bloom				

	A. BASIC IDENTIFICATON DATA
2.	Enter the information requested for the following:
	Each promoter of the issuer, if the issuer has been organized within the past five years;
	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
	• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
	Each general and managing partner of partnership issuers.

		of corporate issuers and of co	orporate general and mana	aging partners of p	partnership issuers; and
Check Box(es) that Apply: Kenneth Grant	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
c/o Winstanley Enterprises	LLC, 150 Baker	Avenue Extension, Suite 3	303, Concord, MA 01742		
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply: Thomas DeAngelis	□ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	•				
c/o Winstanley Enterprises	LLC, 150 Baker	Avenue Extension, Suite 3	303, Concord, MA 01742		
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Code))		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Code))		

			/Lica bl	ngk cheat or	convendues	additional oc	nies of this s	heet, as necess	any)			
			(026.01						————			
				B. INF	ORMAT	ION ABO	UT OFFE	RING				
1. Has	the issuer	sold, or do	es the issue			n-accredited x, Column 2,			ring?	•••••	Yes	No ⊭
2. Wha	at is the mi	nimum inv	estment that	t will be ac	cepted from	m any indi	vidual?				\$ <u>200,</u>	000*
	.1 00	•.	,	1. 6							Yes	No
3. Doe	s the offeri	ing permit	joint owners	ship of a si	ingle unit?.	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •			* subject t	□ to waiver
com offe and/ asso	mission of ring. If a for with a ociated pers	r similar re person to state or states sons of suc	quested for emuneration be listed is ates, list the h a broker of individual)	n for solic an associ name of or dealer, y	itation of ated person the broker	purchasers n or agent or dealer.	in connect of a broke If more t	ction with s er or dealer han five (5)	sales of se registered) persons t	curities in with the S o be listed	the EC	
	•		etwork (br		~=)							
			s (Number			e Zin Code	e)					
			Drive, 29 S			-	•					
	Associate				····,	· · · · · · · · · · · · · · · · · · ·	-					
States in	Which Per	rson Listed	Has Solici	ted or Inter	nds to Soli	cit Purchas	ers					
(Che	eck "All St	ates" or ch	eck individ	ual States)							⊠ All∶	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	(IN) (NE)	[AI] [VN]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	(MN) [OK]	[MS] [OR]	[MO] [PA]
[RI]	·[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[MA]	[WI]	[WY]	[PR]
Full Nan	ne (Last na	me first, if	individual)									
Business	or Reside	nce Addres	ss (Number	and Street	, City, Stat	e, Zip Code	e)	· · · · · · · · · · · · · · · · · · ·				
Name of	Associate	d Broker o	r Dealer		·			<u></u>				
States in	Which Per	rson Listed	Has Solici	ted or Inter	nds to Soli	cit Purchas	ers			 		
			eck individ								□ All S	States
[AL]	(AK)	(AZ)	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	(NE)	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[DN] [AW]	[OH] [VW]	(OK)	[OR] [WY]	[PA] [PR]
			individual)		(01)		[VA]	[MA]	[44.4.]	["1]		
	`	,	,									
Business	or Reside	nce Addres	ss (Number	and Street	, City, Stat	e, Zip Code	e)					
Name of	Associate	d Broker o	r Dealer									
States in	Which Pe	rson Listed	Has Solici	ted or Inter	nds to Soli	cit Purchas	ers					
			eck individ				•				□ All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	(NE) (SC)	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

t.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	An	nount Already Sold
	Debt	\$	\$	
	Equity		\$	
	□ Common □ Preferred			
	Convertible Securities (including warrants)	\$	\$	
	Partnership Interests		\$	
	Other (Specify <u>limited liability company interests</u>)	\$ 30,000,000	\$	11,155,735
	Total*			11,155,735
*	Up to an additional \$10 million of limited liability company interests may be offered in exchange for proper			
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors	D.	Aggregate ollar Amount of Purchases
	Accredited Investors		\$_	11,155,735
	Non-accredited Investors		\$ _	0
	Total (for filings under Rule 504 only)	N/A	\$_	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.			
	Type of offering	Type of Security	D	ollar Amount Sold
	Rule 505		s	
	Regulation A		\$ \$	
	Rule 504		\$	
	Total		°	
	1041		Ψ	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		S	
	Printing and Engraving Costs		\$ \$	5,000
	Legal Fees		\$	100,000
	Accounting Fees		\$	15,000
	Engineering Fees		\$ \$	50,000
	Sales Commissions (specify finders' fees separately)		\$ \$	1,950,000
	Other Expenses (identify)		\$	1,720,000
	Total		\$	2,120,000
	i Vidi	🖴	Φ	

	total expenses furnished in response to Part C-Question 4.a. proceeds to the issuer."			;	\$	27,880,000
5.	Indicate below the amount of the adjusted gross proceeds to the purposes shown. If the amount for any purpose is not knowlest of the estimate. The total of the payments listed must enforth in response to Part C—Question 4.b above.	wn, furnish an estimate	and check the box	x to the		
	,			Payments to Officers, Direct & Affiliates	tors	Payments to Others
	Salaries and fees	14444419419419419419419441944		\$		\$
	Purchase of real estate					
	Purchasing, rental or leasing and installation of machinery					
	Construction or leasing of plant buildings and facilities		k	\$ 500,000	×	\$_6,730,000
	Acquisition of other businesses (including the value of seconfering that may be used in exchange for the assets or secons issuer pursuant to a merger)	urities of another		\$		\$
	Repayment of indebtedness					
	Working capital					
	Other (specify):			\$	_ 0	\$
				\$	_ 0	\$
	Column Totals					
	Total Payments Listed (column totals added)				27,880	
	D. FED	ERAL SIGNATURE				
sigi	e issuer has duly caused this notice to be signed by the undersign nature constitutes an undertaking by the issuer to furnish to the U ormation furnished by the issuer to any non-accredited investor p	J.S. Securities and Excha	inge Commission,			
	uer (Print or Type) Instanley Real Estate Opportunity Fund II, LLC	D. Winsten	le	Date February <u>23</u> ;	2007	
Var	me of Signer (Print or Type) Adam D. Winstanley Title of Sign Authorized S	er (Print or Type) Signatory	naging f	nncipa	ρ	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE									
1.	Is any party described in 17 CFR 230.262 presentule?	ntly subject to any of the disqualification provision	ns of such Yes	No 🗷						
	See Appendi	x, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to furn CFR 239.500) at such times as required by state	nish to any state administrator of any state in which	ch this notice is filed, a notice on	Form D (17						
3.	The undersigned issuer hereby undertakes to fu offerees.	rnish to the state administrators, upon written re-	quest, information furnished by the	ne issuer to						
4.		er is familiar with the conditions that must be sa th this notice is filed and understands that the issu ons have been satisfied.								
	e issuer has read this notification and knows the co y authorized person.	ontents to be true and has duly caused this notice	to be signed on its behalf by the u	indersigned						
	uer (Print or Type) nstanley Real Estate Opportunity Fund II, LLC	Signature Alla D. Ninsterre	Date February 23 2007							
Na	me of Signer (Print or Type) Adam D. Winstanley	Title of Signer (Print or Type) Authorized Signatory	Principal							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-action	to sell to credited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	See Note 1 on Page 10	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		х							х	
AK		Х							Х	
AZ		х							х	
AR		х		····					х	
CA		Х		2	\$200,000	0	0		Х	
СО		х							х	
СТ		х		17	\$3,006,549	0	0		Х	
DE		х		1					х	
DC		х		,					х	
FL		х		2	\$300,000	0	0		х	
GA		х		4	\$900,740	0	0		х	
ні		х							х	
ID		Х							х	
IL		X							х	
IN		Х	1.						Х	
IA		х						-	х	
KS		х							х	
KY		Х							х	
LA		х							х	
ME		Х		3	\$1,112,000	0	0		x ,	
MD		Х							х	
MA		х		8	\$3,027,466	0	0		х	
MI		х							Х	
MN		х							х	
MS		Х							х	

APPENDIX

1	Intend t	o sell to credited s in State	3 Type of security and aggregate offering price offered in state	Type of investor and amount purchased in State					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
	(Part B	-Item 1)	(Part C-Item 1)	Number of	(Pau	t C-Item 2) Number of	1	(Part E	-Item 1)		
State	Yes	No	See Note 1 on Page 10	Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No.		
МО		Х		_					х		
МТ		х							х		
NE		х							х		
NV		х							х		
NH		Х		1	\$100,000	0	0		х		
NJ		Х		1	\$50,494				х		
МИ		х							х		
NY		Х		7.	\$1,004,380	0	0		х		
NC		Х							х		
ND		Х							х		
ОН		Х							х		
ОК		Х							х		
OR		Х							х		
PA		X		2	\$200,386	0	0		х		
RI		Х						•	х		
sc		х		3	\$300,000	0	0		х		
SD		X							х		
TN		Х					-		х		
TX		х		1	\$400,000	0	0		х		
UT		х							Х		
VT		х							Х		
VA		Х							х		
WA		Х		1	\$403,720	0	0		х		
WV		х							х		
WI		X							х		

APPENDIX

1	non-acc	o sell to credited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	4 of investor and ourchased in State rt C-Item 2)		under Sta (if yes, explana waiver	ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No	See Note 1 on Page 10	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		х							Х
PR		х							X

^{1.} Up to \$40 million of limited liability company interests will be offered in all states. Up to \$30 million will be offered for cash and up to \$10 million may be offered in exchange for properties.



^{2. \$150,000} of limited liability company interests were sold to non-US investors.